

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J11037

Entity Name: MANDA, INC.

**FILED**  
**Mar 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

606 E. MADISON  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 172009  
TAMPA, FL 336722009 US

**New Mailing Address:**

FEI Number: 59-2720097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VASQUEZ, CHRISTINE N  
606 E MADISON ST.  
1ST FLOOR  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: VASQUEZ, CHRISTINE N  
Address: 606 E. MADISON ST.  
City-St-Zip: TAMPA, FL 33602

Title: D  
Name: GALLO, LAURA L  
Address: 606 E. MADISON ST.  
City-St-Zip: TAMPA, FL 33602

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTINE N VASQUEZ

PD

03/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date